

TO:
Public Health Departments, Health Care Providers, and COVID-19 Testing Laboratories

FROM:
California Department of Public Health

SUBJECT:
Expanding Access to Testing: Updated Interim Guidance on Prioritization for COVID-19 Laboratory Testing

DATE: April 29, 2020

Testing for Coronavirus Disease 2019 (COVID-19), both PCR and serology, is becoming more readily available at hospitals, academic, commercial, and public health laboratories across California. Governor Newsom and the Testing Task Force are committed to rapidly expanding testing across California, ensuring that more Californians get tested. Expanded testing will help protect all Californians, including racial and ethnic populations known to be disproportionately at risk for severe COVID-19 disease and allow us to better understand the spread of COVID-19 in our communities.

This interim guidance is intended to support public health officials, health care providers, and laboratories in determining prioritization of specific groups for PCR molecular testing when testing availability is limited.

The guidance will be reassessed weekly based on California's evolving situation and input from stakeholders. The prioritization categories below are suggestions to support sequential expansion of testing availability and should not supersede the recommendations of a clinician or local health officer. As testing capacity increases, testing should expand accordingly at the discretion of the Local Health Officer.

Tier 1

Testing Modality: PCR with or without Serology

- Hospitalized patients
- Symptomatic and asymptomatic healthcare workers, first responders, and other social service employees
- Symptomatic persons >65 years of age OR any age with chronic medical conditions that increase the risk of severe COVID 19 illness
- Persons identified for testing by public health contact investigations and disease control activities in high risk settings
- Screening of asymptomatic residents or employees of congregate living facilities including:
 - After positive cases have been identified in a facility
 - Prior to resident admission or re-admission to a facility
- Symptomatic and asymptomatic persons in essential occupations
 - E.g., utility workers, grocery store workers, food supply workers, other public employees

Tier 2

Testing Modality: PCR with or without Serology

- Lower risk symptomatic and asymptomatic persons

Community Surveillance

Test Modality: PCR or Serology

- Surveillance testing of asymptomatic persons as part of community or regional surveillance programs.

Note: All testing should be accompanied by a seamless plan for follow-up of disclosure of test results and linkage to care. Testing of asymptomatic persons in health care, occupational and congregate settings is not a requirement, but may be done if needed to control or prevent the spread of COVID-19. Additionally, in congregate settings decisions should be made for how results will be used for infection control, resident placement, staff and resident cohorting, continuity of care when residents are transferred to other congregate settings, and frequency of repeat testing of residents and staff who test negative.

Quarantine/Isolation

Ill persons should stay home and away from others until there has been no fever without the use of fever-reducing medications, there has been improvement in respiratory symptoms (e.g., cough, shortness of breath) for at least 3 days; AND it is at least 7 days since symptoms first appeared, i.e., the minimum length of time will be 7 days.

Additional Resources

[Interim Guidance for Implementing Home Care of People Not Requiring Hospitalization for COVID-19](#)

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Guidance.aspx>

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Resources.aspx>

<https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/LNCAFL20.aspx>